



# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

|   |                             |                               |           |
|---|-----------------------------|-------------------------------|-----------|
| <b>Application Number</b>                       | 10/667,768                  |                               |           |
|   | <b>Filing Date</b>          | September 22, 2003            |           |
|   | <b>First Named Inventor</b> | Pflueger                      |           |
|   | <b>Group Art Unit</b>       | 3736                          |           |
|   | <b>Examiner Name</b>        | Szmal, Brian Scott            |           |
| <b>Total Number of Pages in This Submission</b> |                             | <b>Attorney Docket Number</b> | D-3026CON |

## ENCLOSURES (check all that apply)

|  |  |  |
|--|--|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br>(in duplicate)         | <input type="checkbox"/> Drawing(s)  | <input type="checkbox"/> After Allowance Communication<br>to TC                            |
| <input checked="" type="checkbox"/> Fee Attached                                   | <input type="checkbox"/> Licensing-related Papers  | <input type="checkbox"/> Appeal Communication to Board of Appeals<br>and Interferences     |
| <input checked="" type="checkbox"/> Amendment/Reply                                | <input type="checkbox"/> Petition  | <input type="checkbox"/> Appeal Communication to TC<br>(Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final   | <input type="checkbox"/> Petition to Convert to a<br>Provisional Application                     | <input type="checkbox"/> Proprietary Information   |
| <input type="checkbox"/> Affidavits/declaration(s)                                 | <input type="checkbox"/> Power of Attorney,<br>Revocation<br>Change of Correspondence<br>Address | <input type="checkbox"/> Status Letter   |
| <input type="checkbox"/> Extension of Time Request                                 | <input type="checkbox"/> Terminal Disclaimer   | <input type="checkbox"/> Other Enclosure(s)<br>(please identify below)                     |
| <input type="checkbox"/> Express Abandonment<br>Request                            | <input type="checkbox"/> Request for Refund  |  |
| <input type="checkbox"/> Information Disclosure<br>Statement                       | <input type="checkbox"/> CD, Number of<br>CD(s) _____  |  |
| <input type="checkbox"/> Certified Copy of Priority<br>Document(s)                 | <input type="checkbox"/> Landscape Table on CD   |  |
| <input type="checkbox"/> Response to Missing Parts/<br>Incomplete Application      | <b>Remarks</b>   |  |
| <input type="checkbox"/> Response to Missing<br>Parts under 37 CFR<br>1.52 or 1.53 |  |  |

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

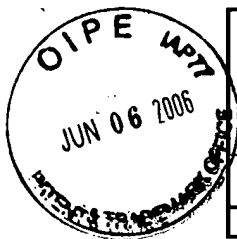
|                     |                                  |                 |        |
|---------------------|----------------------------------|-----------------|--------|
| <b>Firm Name</b>    | Stout, Uxa, Guyan & Mullins, LLP |                 |        |
| <b>Signature</b>    |                                  |                 |        |
| <b>Printed Name</b> | Frank J. Uxa                     |                 |        |
| <b>Date</b>         | June 2, 2006                     | <b>Reg. No.</b> | 25,612 |

## CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO at fax number 571-273-8300, or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

|                              |              |             |          |
|------------------------------|--------------|-------------|----------|
| <b>Signature</b>             |              |             |          |
| <b>Typed or printed name</b> | Janet McGhee | <b>Date</b> | 6/2/2006 |

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# FEE TRANSMITTAL for FY 2005

Patent fees are subject to annual revision.

☐ Application claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 120

## Complete if Known

|                      |                    |
|----------------------|--------------------|
| Application Number   | 10/667,768         |
| Filing Date          | September 22, 2003 |
| First Named Inventor | Pflueger           |
| Examiner Name        | Szmal, B.S.        |
| Art Unit             | 3736               |
| Attorney Docket No.  | D-3026CON          |

## METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_  
☒ Deposit Account Deposit Account Number 21-0890 Deposit Account Name Frank J. Uxa

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee  
☒ Charge any additional fee(s) associated with this communication ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

## FEE CALCULATION

### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

| Application Type | FILING FEES |                       | SEARCH FEES |                       | EXAMINATION FEES |                       | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
|                  | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)         | Small Entity Fee (\$) |                |
| Utility          | 300         | 150                   | 500         | 250                   | 200              | 100                   |                |
| Design           | 200         | 100                   | 100         | 50                    | 130              | 65                    |                |
| Plant            | 200         | 100                   | 300         | 150                   | 160              | 80                    |                |
| Reissue          | 300         | 150                   | 500         | 250                   | 600              | 300                   |                |
| Provisional      | 200         | 100                   | 0           | 0                     | 0                | 0                     |                |
| Subtotal (1)     |             |                       |             |                       |                  |                       | 0              |

### 2. EXCESS CLAIM FEES

| Fee Description   | Small Entity |          |
|---|--------------|----------|
|   | Fee (\$)     | Fee (\$) |
| Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent            | 50           | 25       |
| Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent | 200          | 100      |
| Multiple Dependent Claims   | 360          | 180      |
| Total Claims  | Extra Claims | Fee (\$) |
| -20 or HP =   | x            |          |
| HP = highest number of total claims paid for, if greater than 20  |              |          |
| Indep. Claims   | Extra Claims | Fee (\$) |
| -3 or HP =  | x            |          |
| HP = highest number of independent claims paid for, if greater than 3                                   |              |          |
| Subtotal (2)  |              | 0        |

### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
|--------------|--------------|--|----------|---------------|
| -100 =       | /50 =        | (round up to a whole number)                     | x        |               |
| Subtotal (3) |              |  |          | 0             |

### 4. OTHER FEE(S)

|  |            |
|--|------------|
| <input type="checkbox"/> Surcharge - Late filing fee or oath/declaration: \$130 fee (\$65 small entity discount)                             |            |
| <input type="checkbox"/> Non-English Specification: \$130 fee (no small entity discount)   |            |
| <input checked="" type="checkbox"/> 1-month extension of time: \$120 fee (\$60 small entity discount)  | 120        |
| <input type="checkbox"/> 2-month extension of time: \$450 fee (\$225 small entity discount)  |            |
| <input type="checkbox"/> 3-month extension of time: \$1020 fee (\$510 small entity discount)   |            |
| <input type="checkbox"/> 4-month extension of time: \$1590 fee (\$795 small entity discount)   |            |
| <input type="checkbox"/> 5-month extension of time: \$2160 fee (\$1080 small entity discount)  |            |
| <input type="checkbox"/> Information Disclosure Statement Fee: \$180 fee (no small entity discount)  |            |
| <input type="checkbox"/> Notice of Appeal: \$500 fee (\$250 small entity discount)   |            |
| <input type="checkbox"/> Filing a Brief in Support of Appeal: \$500 fee (\$250 small entity discount)  |            |
| <input type="checkbox"/> Request for Oral Hearing: \$1000 fee (\$500 small entity discount)  |            |
| <input type="checkbox"/> Utility Issue Fee: \$1400 fee (\$700 small entity discount)   |            |
| <input type="checkbox"/> Recording each patent assignment per property (times number of properties): \$40 fee (no small entity fee discount) |            |
| <input type="checkbox"/> Request for Continued Examination: \$790 fee (\$395 small entity discount)  |            |
| <input type="checkbox"/> Other: _____  |            |
| <b>Subtotal (4)</b>  | <b>120</b> |

## SUBMITTED BY

|                   |              |                                   |        |           |              |
|-------------------|--------------|-----------------------------------|--------|-----------|--------------|
| Name (Print/Type) | Frank J. Uxa | Registration No. (Attorney/Agent) | 25,612 | Telephone | 949-450-1750 |
| Signature         |              |                                   |        | Date      | June 2, 2006 |